| Docket | No   |  |
|--------|------|--|
| DOCKEL | INU. |  |

## **DECLARATION FOR U.S. PATENT APPLICATION**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

METHOD AND DEVICE FOR MANUFACTURING SYNTHETIC RESIN COATED METAL CAN BODY

| the specificati                                    | ion of which is attached hereto un   | less the following is che  | cked  |   |
|--|--|--|---|---|
|  | onas United States Applica<br>Application Number <u>PCT/JP200</u>  |  |   | 004as PCT                                     |
| I hereby state claim(s), as an                     | that I have reviewed and understa<br>mended by any amendment referr  | and the contents of the all ed above.  | bove-identified specification,  | including the                                 |
| I acknowledge<br>Regulations, §                    | e the duty to disclose information § 1.56.   | which is material to pat   | entability as defined in Title  | 37, Code of Federal                           |
| for patent or i                                    | n foreign priority benefits under T<br>nventor's certificate listed below<br>tificate having a filing date before  | and have also identified   | below any foreign applicatio  | eign application(s)<br>n for patent or        |
| a ist maior forcio                                 | _  |  |   | Priority Claimed                              |
| (List prior foreig<br>applications. See<br>note A) |  | JAPAN<br>(Country)   | 17/12/2003 (Day/Month/Year Filed)   | ⊠ Yes □ No                                    |
|  | (Number)   | (Country)  | (Day/Monus real rileu)  | ☐ Yes ☐ No                                    |
|  | (Number)   | (Country)  | (Day/Month/Year Filed)  | res No  |
|  | (Number)   | (Country)  | (Day/Month/Year Filed)  | ☐ Yes ☐ No                                    |
|  | (1.4   | (004114))  | (20)////  |   |
|  | (Number)   | (Country)  | (Day/Month/Year Filed)  | ∐ Yes ∐ No                                    |
|  | See attached list for additional   |  |   |   |
| insofar as the<br>in the manner<br>information w   | n the benefit under Title 35, Unite subject matter of each of the claim provided by the first paragraph of the is material to patentability as became available between the filiplication. | ns of this application is a<br>of Title 35, United State<br>of defined in Title 37, Co | not disclosed in the prior Uni<br>s Code, § 112, I acknowledg<br>de of Federal Regulations, | ted States application e the duty to disclose |
| (List prior U.S.                                   |  |  | State   | us  |
| Applications)                                      | (A) Post G (1N)  | (Fili - D / )  | Patented Pend   | ing  Abandoned                                |
|  | (Application Serial No.)   | (Filing Date)  |   |   |
|  | (Application Serial No.)   | (Filing Date)  | ☐ Patented ☐ Pend   | ing ∐ Abandoned                               |
|  | (Application Serial No.)   | (Filing Date)  | Patented Pend   | ing   Abandoned                               |
|  | (ppirounon seriui ivo.)  | (i iiiig Date)   | ☐ Patented ☐ Pend   | ing 🔲 Abandoned                               |
|  | (Application Serial No.)   | (Filing Date)  |   | <del>-</del>                                  |

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

## **Customer Number: 38834**

Please direct all communications to the following address:

Westerman, Hattori, Daniels & Adrian, LLP 1250 Connecticut Avenue, N.W., Suite 700, Washington, D.C. 20036

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18 of the United States Code, § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

| See note C)            | Full name of sole or f  | irst inventor (given name, family name)                         |                  | itsuhiko AOYAGI         |  |  |
|------------------------|---|---|------------------|-------------------------|--|--|
|                        | Inventor's signature  | <u>Mitsuhiko Hovaqi</u>   | Date             | 25/4/2006               |  |  |
|                        | Residence   | Yokohama, Japan   | Citizenship      | Japanese                |  |  |
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|                        |   |   |                  |                         |  |  |
| Full name of secon     |   | nventor (given name, family name)                               | Norihito SAIKI   |                         |  |  |
| _                      | Inventor's signature  | Northite Saiki  | Date             | 25/4/2006               |  |  |
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|                        | Inventor's signature  | Hidekazu Tomaru   | Date             | 25/4/2006               |  |  |
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|                        |   |   |                  |                         |  |  |
| Full name              | Full name of fourth in  | ne of fourth inventor (given name, family name)                 |                  |                         |  |  |
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|                        |   |   |                  |                         |  |  |
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|                        |   |   |                  |                         |  |  |
| Invento                | Full name of sixth inv  | entor (given name, family name)                                 |                  |                         |  |  |
|                        | Inventor's signature  |   | Date             |                         |  |  |
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|                        | Post Office Address   |   | <del>_</del><br> |                         |  |  |
|                        |   |   |                  |                         |  |  |
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